## **Application or Docket Number**

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE	] ]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			3 3minus 20=		. 13			X\$ 9≈		OR.	X\$18=	234	
INDEPENDENT CLAIMS			3 minus 3 =		. Q			X40=		OR	X80=		
Mι	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT		į			+135=		1	+270=		
# If the difference in column 1 is less than zero, enter "0" in						olumn 2		TOTAL		OR	TOTAL	041	
<i>¥</i> CLAIMS AS AMENDED - PART II								TOTAL		JUN	OTHER	THAN	
		(Column 1)		(Colur		(Column 3)		SMALL	NTITY	OR	SMALL	-	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80= .		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	,	OR	+270=		
								TOTAL ADDIT. FEE		OR	. TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)										• .	, ADDII. 1 EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	•	OR	X\$18=		
	Independent	ATATION OF ME	Minus	***		<u>                                     </u>	1	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		<b>J</b>	+135=		OR	+270=		
								TOTAL		OB.	TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEE		,	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										. 270		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Provings Paid For" IN THIS SPACE is less than 30. and a "700".										OR	+270= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													